



State of New Hampshire

Department of Revenue Administration

45 Chenell Drive, PO Box 457, Concord, NH 03302-0457
Telephone (603) 271-2318
www.state.nh.us/revenue



G. Philip Blatsos
Commissioner

Barbara T. Reid
Assistant Commissioner

The following information must be filed with the Department of Revenue Administration prior to the issuance of a tax certificate for a **withdrawal, cancellation or dissolution**:

1. A non-refundable fee of \$30.00 made payable to the State of New Hampshire, as required under RSA 77-A:18 and RSA 77-E:12. Approximate response time is 60 days.
2. A written request for the certificate with the original signature of a corporate officer.
3. Explanation of why the withdrawal, cancellation or dissolution is being requested.
4. The date the business organization stopped doing business in New Hampshire.
5. If required to file, a final New Hampshire Business Enterprise and/or Business Profits Tax return for the period that includes the last date of business in New Hampshire. A copy of the first four pages of the federal return actually filed with the Internal Revenue Service must be attached to the New Hampshire return.
6. If not required to file, a copy of the first four pages of the federal return actually filed with the Internal Revenue Service for the period that includes the last date of business in New Hampshire.
7. For a dissolution, copies of Federal Form 966, the minutes of the board of directors' meeting authorizing the dissolution and a plan of liquidation.
8. Schedule detailing the distribution of all New Hampshire assets.
9. If desired, a power of attorney or a personal letter signed by a corporate officer indicating an individual that you designate to act as your agent in tax matters, or a letter authorizing us to send the certificate to someone other than the taxpayer.

The following information must be filed with the Department of Revenue Administration prior to the issuance of a tax certificate of **good standing**:

1. A non-refundable fee of \$30.00 made payable to the State of New Hampshire, as required under RSA 77-A:18 and RSA 77-E:12. Approximate response time is 30 days.
2. A written request for the certificate with the original signature of a corporate officer.
3. Explanation of why the good standing is being requested.
4. Any and all returns that are due but have not yet been filed with the Department, including copies of all federal pages, as filed with the Internal Revenue Service.

TDD Access: Relay NH 1-800-735-2964

Individuals who need auxiliary aids for effective communication in programs and services of the Department of Revenue Administration are invited to make their needs and preferences known to the Administration Division.

STATE OF NEW HAMPSHIRE

Filing fee: \$35.00
Use black print or type.
Leave 1" margins both sides.

Form FLLC-3
RSA 304-C:68

APPLICATION FOR CERTIFICATE OF CANCELLATION OF
REGISTRATION OF FOREIGN LIMITED LIABILITY COMPANY

PURSUANT TO THE PROVISIONS OF CHAPTER 304-C, SECTION 68 OF THE NEW HAMPSHIRE REVISED STATUTES ANNOTATED, THE UNDERSIGNED HEREBY APPLIES FOR A CERTIFICATE OF CANCELLATION OF REGISTRATION, AND FOR THAT PURPOSE SUBMITS THE FOLLOWING STATEMENT:

FIRST: The name of the limited liability company is _____
_____.

SECOND: It is formed under the laws of _____.

THIRD: It is not doing business in New Hampshire.

FOURTH: It hereby surrenders its certificate of registration to transact business in New Hampshire.

FIFTH: It revokes the authority of its registered agent for service of process in this state and consents that service of process in any action, suit, or proceeding based upon any cause of action arising in this state during the time it was authorized to do business in this state may thereafter be made on it by service thereof upon the secretary of state.

SIXTH: The mailing address to which a person may mail a copy of any process against the limited liability company that may be served on him is _____
_____.

SEVENTH: A statement is attached from the New Hampshire Department of Revenue Administration that all taxes due from or accrued by the limited liability company through the date of the application for a certificate of cancellation of registration have been either assessed and paid or adequately provided for in a manner acceptable to the New Hampshire Department of Revenue Administration.

Dated _____, _____

*Signature: _____

Print or type name: _____

Title: _____

- * Shall be executed on behalf of the foreign limited liability company by a person with authority to do so under the laws of the state or other jurisdiction of its formation, or, if the foreign limited liability company is in the hands of a receiver, executor, or other court appointed fiduciary, trustee, or other fiduciary, it must be signed by that fiduciary.

SECRETARY OF STATE'S CANCELLATION FILING REQUIREMENTS:

1. Original tax certificate from the N.H. Dept. of Revenue Administration (DRA).

To obtain tax certificate (see attached), submit a separate written request with a \$30.00 fee to:

In-State Bureau, Audit Division
NH Department of Revenue Administration
PO Box 457
Concord NH 03302-0457

2. Limited liability company must be in good standing as evidenced by the filing of all annual report(s) due.
3. After obtaining an original tax certificate from the DRA, the tax certificate, an original and one copy of completed Form FLLC-3 with \$35.00 N.H. Department of State filing fee must be sent to:

Corporation Division
Department of State
107 North Main Street
Concord, NH 03301-4989.

DO NOT SEND THIS APPLICATION (FLLC-3) TO THE DEPARTMENT OF REVENUE ADMINISTRATION. Wait until you receive the tax certificate from the DRA and then submit all required documents to the Corporation Division.